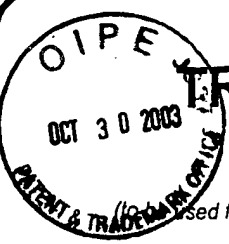


Please type a plus sign (+) inside this box → ☐

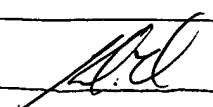
PTO/SB/21 (08-00)


Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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 <b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/628,596
	Filing Date	July 28, 2003
	First Named Inventor	Josef Dirr
	Group Art Unit	Not yet assigned
	Examiner Name	Not yet assigned
Total Number of Pages in This Submission	Attorney Docket Number	496P017

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Form PTO-1449 -References cited - 6
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kevin S. Lemack Nields & Lemack
Signature	
Date	October 28, 2003

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: <b>Oct. 28, 2003</b>		
Typed or printed name	Kevin S. Lemack	
Signature		Date   October 28, 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Josef Dirr  
Serial No. 10/628,596  
Filed : July 28, 2003  
For : PROCESS FOR THE TRANSMISSION OF ANALOG AND  
DIGITAL INFORMATION  
Examiner : Not yet assigned  
Art Unit : Not yet assigned  
Attorney  
Docket No. : 496P017


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Sir:

INFORMATION DISCLOSURE STATEMENT


The Examiner is respectfully requested to consider the documents which are listed on the attached form PTO 1449.

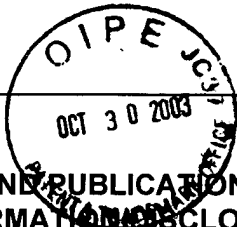
Copies of the documents listed on the attached form are filed herewith.

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\_\_\_\_\_  
Signature: Kevin S. Lemack  
Date: October 28, 2003

Respectfully submitted,

  
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Attorney for Applicants  
Registration No. 32,579  
Niels & Lemack  
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Westboro, MA 01581  
TEL: (508) 898-1818



<b>FORM PTO-1449</b> <b>LIST OF PATENTS AND PUBLICATIONS FOR</b> <b>APPLICANT'S INFORMATION DISCLOSURE</b> <b>STATEMENT</b>	<b>ATTY. DOCKET NO.</b> 496P017	<b>SERIAL NO.</b> 10/628,596
	Josef Dirr	
	<b>FILING DATE</b> July 28, 2003	<b>GROUP</b> Not yet assigned

**REFERENCE DESIGNATION****U.S. PATENT DOCUMENTS**

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	AA	4,675,721	6/1987	Dirr	358	13	
	AB	4,731,789	3/1988	Thornton	372	45	
	AC	4,794,621	12/1988	Dirr	375	52	
	AD	4,947,483	8/1990	Dirr	370	30	
	AE	5,587,797	12/1996	Dirr	358	261.1	
	AF	6,072,829	6/2000	Dirr	375	239	

**FOREIGN PATENT DOCUMENTS**

		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	BA							
	BB							

**OTHER ART (Including Author, Title, Date, Pertinent Pages, etc.)**

	CA		
	CB		
	CC		
	CD		

**EXAMINER****DATE CONSIDERED**

**EXA MINER:** Initial reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance *and* not considered. Include copy of this form with next communication to applicant.